



HEALTH CARE FINANCING ADMINISTRATION
CENTER FOR MEDICAID AND STATE OPERATIONS

Disabled and Elderly Health Programs Group
Division of Integrated Health Systems
7500 Security Boulevard, Mail Stop S2-14-26
Baltimore, Maryland 21244-1850

THERESA PRATT
DIRECTOR
(410) 786-5831

July 1, 2001

Mr. Bob Sharpe
Deputy Secretary for Medicaid
Agency for Health Care Administration
2727 Mahan Drive
Tallahassee, Florida 32308

Dear Mr. Sharpe:

I am pleased to inform you that the Centers for Medicare and Medicaid Services (CMS), formerly the Health Care Financing Administration (HCFA), is approving Florida's request, to renew and expand its Medicaid Prepaid Mental Health Plan (PMHP) for a period of 2 years beginning July 1, 2001, through June 30, 2003.

Our decision is based on the evidence submitted to CMS demonstrating that the State's proposal is consistent with the purposes of the Medicaid program and will meet all statutory and regulatory requirements for assuring beneficiaries' access to care, quality of services and waiver cost-effectiveness for §1915(b) programs. This approval provides for a waiver of Sections 1915 (b) (1); 1915 (b)(4); 1902(a)(1); 1902(a)(10)(B); and 1902 (a)(23) of the Social Security Act (the Act) regarding Statewideness, Comparability of Services and Freedom of Choice of Providers.

Please note that our approval is contingent upon the factors listed below:

Independent Evaluation

Approval of this request is contingent upon Florida arranging for an independent evaluation of the overall waiver program, which includes Area Six and any expansion areas. Special emphasis should be placed on access to care, quality of care and cost effectiveness. The results of the evaluation are to be submitted to CMS no later than three months before the expiration of this waiver time period.

Monitoring

1. The State will submit to CMS on an annual basis the number of individuals participating in the waiver who are identified as a special population as defined in this waiver. Specifically for children, the State should provide a comprehensive report that identifies special needs children as defined by the Categories One through Five definition of special needs children provided in the Balanced Budget Act (BBA) of 1997 and then identifies those within the BBA categories who are considered special needs under the waiver (e.g., total number of SSI children enrolled in the

waiver and the number of SSI children diagnosed as SED). This information should be analyzed and compared to the entire population identified in Categories One through Five enrolled in the waiver. Identification should be by age group and may be done through either aid code analysis or manual review.

2. The State will review and track utilization (e.g. the number accessing services through PHMP), complaints, and grievances involving children in the waiver defined by Categories One through Five of the BBA. On an annual basis, the State will report to CMS the number of children accessing services, and the number of complaints and grievances and their disposition.
3. The State will provide the Atlanta Regional Office with readiness reviews conducted on new contractors, along with the submission of the PHMP contract at least 30-days prior to implementation in an expansion area.

Florida may request that this authority be renewed for another 2 years no later than March 31, 2003. We wish you continued success in the operation of your Medicaid program. If you have any questions please contact Roberta Kelley at (404) 562-7461 in our Atlanta Regional Office or Tammi Levy-Cantor at (410) 786-2804 on my staff in Central Office.

Sincerely,

/s/

Theresa A. Pratt
Director
Division of Integrated Health Systems
Disabled and Elderly Health Programs Group
Center for Medicaid and State Operations

cc:

Eugene Grasser, ARA Atlanta Regional Office